

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - 25476	2. Fiscal Year Covered From:		
	1 / 1 / 2005 Through: 12 / 31 / 2005		
3. Name and address of person filing.	4. Name, file number, and address of labor organization.		
Name Herbert SK Kaopua, Sr	Name Plumbers AFL-CIO, LU 675		
	Labor Organization File Number 025 - 657		
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any		
Street 1109 Bethel Street	Street 1109 Bethel Street		
City Honolulu	City Honolulu		
State Hawaii ZIP Code + 4 96813-2209	State Hawaii ZIP Code + 4 96813-2209		

Enter appropriate data below If, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions monetary value from an employer whose en	s (including loans) with, or o nployees your organizatio	derived income or other economic benefit of on represents or is actively seeking to represent.
6. Name and address of Employer (including trade	name, if any).	7.a. Nature of Interest, Transaction, or Income.
Name		
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any		
Street		7.b. Amount.
City		
•		
State ZIP	Code + 4	

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information	
submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the	ne
undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)	

Signed _	In Sudom	1.Kd	Kantua C
	0 01 0	1 1	The Office Comment

onMAY 3 - 2006

(808)536-5454

Date

Telephone Number

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

9. Business deals with:

Name PAMCAH-UA Local 675 Coopertation Fund

a. Labor Organization

Trade Name, if any:

P.O. Box, Bldg., Room No., if any Suite 403

Street 1109 Bethel Street

City Honolulu

State Hawaii

ZIP Code + 4 96813-2218

b. Trust

C. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name Various Signatory Contractors

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State

ZIP Code + 4

11.a. Nature of such dealing.

 ${\tt PAMCAH-UA}$ Local 675 Cooperation Fund is supported by contributions from signatory contractors.

11.b. Approximate dollar value of such dealing.

\$187,216

12.a. Nature of interest held or income received.

Remibursement of expenses of participation in educational seminars and representation of the trust at various meetings and events.

12.b. Amount.

14.a. Nature of payment.

\$9,108

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

 Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State

ZIP Code + 4

13.b. Is the Business an Employer

or Consultant

14.b. Amount of payment.

Name of Person Filing Herbert SK Kaopua, Sr

File Number U-

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value **from a business** (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (Including trade name, if any). Name PAMCAH-UA Local 675 Administrative Office Trade Name, if any: P.O. Box, Bidg., Room No., if any Suite 403 Street 1109 Bethel Street City Honolulu State Hawaii ZIP Code + 4 96813 - 2218 11. a. Nature of such dealing. PAMCAH-UA Local 675 Trust Funds Trade Name, if any: P.O. Box, Bidg., Room No., if any Suite 403 Street 1109 Bethel Street City Honolulu State Hawaii ZIP Code + 4 96813 - 2218 11. a. Nature of such dealing. PAMCAH-UA Local 675 Administrative Office provides administrative services to the various PAMCAH-UA Local 675 Trust funds. P.O. Box, Bidg., Room No., if any Suite 403 Street 1109 Bethel Street City Honolulu State Hawaii ZIP Code + 4 96813 - 2218 11. b. Approximate dollar value of such dealing. 12. a. Nature of interest held or income received. Reimbursement for cost of participation in various conferences relating to trust administration.		9. Business deals with:	
Trade Name, if any: P.O. Box, Bidg., Room No., if any Suite 403 Street 1109 Bethel Street City Honolulu State Hawaii ZIP Code + 4 96813 - 2218 10. If 9b. or 9c. is checked give trust or employer's name. Name PAMCAH-UA Local 675 Trust Funds Trade Name, if any: P.O. Box, Bidg., Room No., if any Suite 403 Street 1109 Bethel Street City Honolulu State Hawaii ZIP Code + 4 96813 - 2218 11.a. Nature of such dealing. PAMCAH-UA Local 675 Administrative Office provide administrative sto the various PAMCAH-UA Local 675 trust funds. Expenses of operating the office are prorated among the various funds. 11.b. Approximate dollar value of such dealing. 11.c. Nature of interest held or income received. Reimbursement for coet of participation in various conferences relating to trust administration.	8. Name and address of Business (including trade name, if any).	a. Dusiness deals with:	
Street 1109 Bethel Street City Honolulu State Hawaii ZIP Code + 4 96813-2218 10. If 9b. or 9.c. is checked give trust or employer's name. Name PAMCAH-UA Local 675 Trust Funds Trade Name, if any: P.O. Box, Bidg., Room No., If any Suite 403 Street 1109 Bethel Street City Honolulu State Hawaii ZIP Code + 4 96813-2218 11.a. Nature of such dealing. PAMCAH-UA Local 675 Administrative Office provids administrative services to the various FAMCAH-UA Local 675 trust funds. Expenses of operating the office are prorated among the various funds. City Honolulu State Hawaii ZIP Code + 4 96813-2218 11.b. Approximate dollar value of such dealing. \$1,092,651 12.a. Nature of interest held or income received. Reimbursement for cost of participation in various conferences relating to trust administration.	Name PAMCAH-UA Local 675 Administrative Office	a. Labor Organization	
Street 1109 Bethel Street City Honolulu State Hawaii ZIP Code + 4 96813-2218 10. If 9.b. or 9.c. is checked give trust or employer's name. Name PAMCAH-UA Local 675 Trust Funds Trade Name, if any: P.O. Box. Bidg., Room No., if any Suite 403 Street 1109 Bethel Street City Honolulu State Hawaii ZIP Code + 4 96813-2218 11.a. Nature of such dealing. PAMCAH-UA Local 675 Administrative Office provids administrative services to the varous PAMCAH-UA Local 675 trust funds. Expenses of operating the office are prorated among the various funds. Street 1109 Bethel Street City Honolulu State Hawaii ZIP Code + 4 96813-2218 11.b. Approximate dollar value of such dealing. \$1,092,651 12.a. Nature of interest held or income received. Reimbursement for cost of participation in various conferences relating to trust administration.	Trade Name, if any:	No h Truck	
City Honolulu State Hawaii ZIP Code + 4 96813-2218 10. If 9.b. or 9.c. is checked give trust or employer's name. Name PAMCAH-UA Local 675 Trust Funds Trade Name, if any: P.O. Box, Bidg., Room No., if any Suite 403 Street 1109 Bethel Street City Honolulu State Hawaii ZIP Code + 4 96813-2218 11.a. Nature of such dealing. PAMCAH-UA Local 675 Administrative Office provide administrative services to the various PAMCAH-UA Local 675 Trust funds. Expenses of operating the office are prorated among the various funds. 11.a. Nature of such dealing. PAMCAH-UA Local 675 Administrative Office provide administrative services to the various PAMCAH-UA Local 675 Trust funds. Expenses of operating the office are prorated among the various funds. Street 1109 Bethel Street City Honolulu State Hawaii ZIP Code + 4 96813-2218 11.b. Approximate dollar value of such dealing. \$1,092,651 12.a. Nature of interest held or income received. Reimbursement for cost of participation in various conferences relating to trust administration.	P.O. Box, Bldg., Room No., if any Suite 403	X U. Hust	
State Hawaii ZIP Code + 4 96813-2218 10. If 9.b. or 9.c. is checked give trust or employer's name. Name PAMCAH-UA Local 675 Trust Funds Trade Name, if any: P.O. Box, Bldg., Room No., if any Suite 403 Street 1109 Bethel Street City Honolulu State Hawaii ZIP Code + 4 96813-2218 11.a. Nature of such dealing. PAMCAH-UA Local 675 Administrative Office provids administrative services to the various PAMCAH-UA Local 675 trust funds. Expenses of operating the office are prorated among the various funds. 11.b. Approximate dollar value of such dealing. 12.a. Nature of interest held or income received. Reimbursement for cost of participation in various conferences relating to trust administration.	Street 1109 Bethel Street	c. Employer	
10. If 9.b. or 9.c. is checked give trust or employer's name. Name PAMCAH-UA Local 675 Trust Funds Trade Name, if any: P.O. Box, Bldg., Room No., if any Suite 403 Street 1109 Bethel Street City Honolulu State Hawaii ZIP Code + 4 96813-2218 11.a. Nature of such dealing. PAMCAH-UA Local 675 Administrative Office provids administrative services to the various PAMCAH-UA Local 675 trust funds. Expenses of operating the office are prorated among the various funds. 11.a. Nature of such dealing. PAMCAH-UA Local 675 Administrative Office provids administrative services to the various PAMCAH-UA Local 675 trust funds. Expenses of operating the office are prorated among the various funds. 11.a. Nature of such dealing. PAMCAH-UA Local 675 Administrative Office provids administrative services to the various PAMCAH-UA Local 675 trust funds. Expenses of operating the office are prorated among the various funds. 11.a. Nature of such dealing. PAMCAH-UA Local 675 Administrative Office provids administrative services to the various PAMCAH-UA Local 675 trust funds. Expenses of operating the office are prorated among the various funds. 11.a. Nature of such dealing.	City Honolulu		
Name PAMCAH-UA Local 675 Trust Funds Trade Name, if any: P.O. Box, Bldg., Room No., if any Suite 403 Street 1109 Bethel Street City Honolulu State Hawaii ZIP Code + 4 96813-2218 Tib. Approximate dollar value of such dealing. \$1,092,651 12.a. Nature of interest held or income received. Reimbursement for cost of participation in various conferences relating to trust administration.	State Hawaii ZIP Ccde + 4 96813-2218		
Name PAMCAH-UA Local 675 Trust Funds Trade Name, ifany: P.O. Box, Bldg., Room No., ifany Suite 403 Street 1109 Bethel Street City Honolulu State Hawaii ZIP Code + 4 96813-2218 11.b. Approximate dollar value of such dealing. \$1,092,651 12.a. Nature of interest held or income received. Reimbursement for cost of participation in various conferences relating to trust administration.	10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Trade Name, if any: P.O. Box, Bldg., Room No., if any Suite 403 Street 1109 Bethel Street City Honolulu State Hawaii ZIP Code + 4 96813-2218 11.b. Approximate dollar value of such dealing. \$1,092,651 12.a. Nature of interest held or income received. Reimbursement for cost of participation in various conferences relating to trust administration.	Name PAMCAH-UA Local 675 Trust Funds	administrative services to the varous PAMCAH-UA	
Street 1109 Bethel Street City Honolulu State Hawaii ZIP Code + 4 96813-2218 11.b. Approximate dollar value of such dealing. \$1,092,651 12.a. Nature of interest held or income received. Reimbursement for cost of participation in various conferences relating to trust administration.	Trade Name, if any:	office are prorated among the various funds.	
City Honolulu State Hawaii ZIP Code + 4 96813-2218 11.b. Approximate dollar value of such dealing. \$1,092,651 12.a. Nature of interest held or income received. Reimbursement for cost of participation in various conferences relating to trust administration.	P.O. Box, Bldg., Room No., if any Suite 403		
State Hawaii ZIP Code + 4 96813-2218 11.b. Approximate dollar value of such dealing. \$1,092,651 12.a. Nature of interest held or income received. Reimbursement for cost of participation in various conferences relating to trust administration.	Street 1109 Bethel Street		
12.a. Nature of interest held or income received. Reimbursement for cost of participation in various conferences relating to trust administration.	City Honolulu		
Reimbursement for cost of participation in various conferences relating to trust administration.	State Hawaii ZIP Code + 4 96813-2218	11.b. Approximate dollar value of such dealing. \$1,092,651	
conferences relating to trust administration.		12.a. Nature of interest held or income received.	
12.b. Amount. \$25,415		Reimbursement for cost of participation in various conferences relating to trust administration.	
12.b. Amount. \$25,415			
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		12.b. Amount. \$25,415	

Name of Person Filing Herbert SK Kaopua, Sr

File Number U-

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value **from a business** (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Busine	ess (including trade name, if any).	9. Business deals with:		
Name Bank of Hawaii Trade Name, if any:		a. Labor Organization		
P.O. Box, Bldg., Room No., if a	ny P.O. Box 3170	× b. Trust		
Street		c. Employer		
City Honolulu				
State Hawaii	ZIP Code + 4 ,96802			
10. If 9.b. or 9.c. is checked give	trust or employer's name.	11.a. Nature of such dealing.		
Name PAMCAH-UA Local	675 Trust Funds	Investment management and custodial services		
Trade Name, if any:				
P.O. Box, Bldg., Room No., if a	Ty Suite 403			
Street 1109 Bethel Stre	eet			
City Honolulu				
State Hawaii	ZIF Code + 4 96813-2218	11.b. Approximate dollar value of such dealing.	214,208	
		12.a. Nature of interest held or income received.		
		Cost of various meetings and events hosted b of Hawaii	y Bank	
		12.b. Amount.	\$327	

Name of Person Filing Herbert SK Kaopua, Sr

File Number U-

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value **from a business** (1) a substantial part of which consists of buying from, seiling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or seiling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).	9. Business deals with:
Name Lorco, Inc	x a. Labor Organization
Trade Name, if any:	, ,
P.O. Box, Bldg., Room No., if any	b. Trust
Street 98-1746 Nahele Street	c. Employer
City Aiea	
State Hawaii ZIP Code + 4 96701-1726	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.
Name	Sold printed T-shirts and hats
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any	
Street	
City	
State ZIP Code + 4	11.b. Approximate dollar value of such dealing. \$5,682
	12.a. Nature of interest held or income received.
	All of the stock of Lorco, Inc is owned by Herbert S.K. Kapoua, Sr. and his wife Loretta Kaopua
	12.b. Amount. \$522

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Name of Person Filing	Harbart	CK	Kaonna	C۲

File Number U-

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value **from a business** (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name Lorco, Inc	a. Labor Organization	
Trade Name, if any:	× b. Trust	
P.O. Box, Bldg., Room No., if any	× 5. 11031	
Street 98-1746 Nahele Street	c. Employer	
City Aiea		
State Hawaii ZIP Code + 4 96701-1726		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name PAMCAH-UA Local 675 Coopertation Fund	Sold printed T-shirts and hats	
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any Suite 403		
Street 1109 Bethel Street		
City Honolulu		
State Hawaii ZIP Code + 4 96813-2218	11.b. Approximate dollar value of such dealing. \$1,008	
	12.a. Nature of interest held or income received.	
	All of the stock of Lorco, Inc. is owned by Herbert S.K. Kaopua, Sr. and his wife Loretta Kaopua	
	12.b. Amount. \$93	